Œ 'n

- I A	TTO	RNE	Y'S	DOC	KET	NO

PATENT A	APPLICA IR	ANSMITTALL	EIIER				
TO THE COMMISSIONED			: 210× M	MARD		PT0	
. Hansmitted neigenith for	thing is the petent ap	pu	_			S	
101 S/S 772701	and h	KTHOU	FOAC	ELLVLY	r	87.5 09/6	
·	OMNUM	( ATION :	)			<del>`</del>	=
Enclosed are:							
an assignment of th	shoots of drawing.	710N F	INDAD	(almbra	UNICAT	1000	
₩ an assignment of th	B Invention to			LTD	<u></u>		
a certified copy of					appli	ication.	
2 2000ciate power of							
verified state	ment to establi	sh small exti	ty status under	37 CFR 1.9 a	and 1.27.	_	
C	CLAIMS AS FIL	ED	SMALL ENT	TITY .	OTHER THA		
OR.	NO. FILED	NOEXTRA	RATE F	<u>OR</u>	RATE F	EE	
ASIC FEE				345 OR		s	
OTAL CLAIMS 15	-20 -	•	x \$ = \$	O OR	× \$ = 3		
NDEP CLAIMS	-3 -	•	×\$ × 3	O OR	×\$ = 5		
MULTIPLE DEPENDENT CLAIR	M PRESENT	0	+\$ = 5	O OR	+\$ -s		
If the difference in col. 1 is less	than zaro, enter "O" in c	xol. 2	TOTAL *	345 OF	TOTAL S		
Please charge  A duplicate c						<b>₹</b>	
A duplicate c	amount of \$	345 to cov	er the filing for	is enclosed.	FOR (	ELODIN	n
	h this communi	cation or cred	charge payment lit any overpaym of this sheat is	sent to Depos	ring fees it Account		
				$\mathcal{T}$	otol: ?	385	
☐ Any •	dditional filing	fees required	l under 37 CFR	1.16.			
Any p	atent application	n processing	fees under 37 C	FR 1.17			
the pendency of	of this applicati	on or credit a	charge payment my overpayment f this sheet is e	t to Deposit A	ing fees duri Account	ng	
Any t	filing fees unds	r 37 CFR 1.16	for presentatio	n of extra cla	ims.		
☐ Any	patent applicati	on processing	fees under 37 C	FR 1.17.			
			t or before mai	ling of the No	otic•		
7/10/120	lowance, parawa:	at to 37 CFR	1.311(b).		240)		
date	<del></del>	dine	hune .				

Patent and Trademark Office - U.S. DEPARTMENT of COMMERCE

Form PTO-FB-A510 (10-85) (also form PTO-1082)

PTC/SB/17 (10-96)
red for use through 9/30/96 OM8 0651-0032
Patent and Trace Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

		Complete if Known						
•	t	App	icati	on N	umber			
ANOSSITTAI		Filing Date				<del></del>		
FEE TRANSMITTAL		First Nation Inventor		TTOP HANA	<u> </u>			
,	E	Grou	o Art	Unit			<u></u>	
		Examiner Na					, o	
TOTAL AMOUNT OF PAYMENT (\$)	- 1	Atton	ney [	ocke	Number			
							- vi	
METHOD OF PAYMENT (check one,	1	• •	•	F	FEE CALC	CULATION (continued)		
							75	
The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:					FEES		66	
Deposit	Fee		Fee	Fe	•	Fee Description	Fee Paid	
Account	Con	• • •				- into filling fee or oath		
Number Deposit	106	130	206	66	-			
Account	127	50	227	25	Surphsites cover shee	- less provisional filing less or	1 1	
Name	f						<b>——</b>	
Charge Any Additional Charge the Issue Fee Set in 37 Fee Required Under 37 CFR 1.18 at the Making of the	139	130	139	130	-	sh specification	<b></b>	
CFR 1.16 and 1.17 Notice of Allowance, 37 CFR 1.311(b)	147	2,460	147	2.460	For filing a	request for reexamination	<u></u>	
	112	900	112	900		g publication of SIR pnor to	1	
2. Payment Enclosed:	1				Examiner i	ection	<b> </b>	
Check Money Other	113	1,790	113	1,790		g publication of SIR after	j	
	{				Examiner s		<u> </u>	
FEE CALCULATION (less effective 10/01/96)	115	110	215	55	Extension (	for response within first month	ļ j	
1. FILING FEE	115	390	216	195	Extension f	for response within second month		
, riemo ree	117	930	217	465	Extension 6	or response within third month	[ [	
Large Entity Small Entity Fee Fee Fee Fee Fee Description Fee Paid	118	1,470	218	735	Extension f	or response within fourth month		
Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	119	300	219	150	Notice of A	ppeal		
101 770 (201) 385 Utility filling fee 3 45	120	300	220	150	Filling a brie	of in support of an appeal		
106 320 206 160 Design filing fee	121	260	221	130	Request for	r orsi heanng		
107 530 207 265 Plant filing fee	138	1,470	138	1,470	Petition to a	nstitute a public use proceeding		
108 770 208 385 Reissue filing fee	140	110	240	55	Petition to r	revive unavoidably abandoned		
114 150 214 75 Provisional filing fee					application			
	141	1,290	241	645	Petition to r	revive unintentionally		
SUBTOTAL (1) (S) 3 45					ebendoned	application		
	142	1,290	242	645	Utility issue	los (or ressue)		
2. CLAIMS Fee from Fee Paid	143	440	243	220	Design issu	us foo		
Total Claims   5 -20 = 0 X = 0	144	650	244	325	Plant issue	lec		
ndependent 2 -3 = O X =	122	130	122	130	Petitions to	the Commissioner		
Multiple Dependent Claims X =	123	50	123	50	Pelitions rei	lated to provisional applications		
	126	230	126	230	Submission	of Information Disclosure Stmt		
Large Entity Small Entity	581	40/	581)	40	Recording e	each petent assumment per	10-	
Fee Fee Fee Fee Description Code (\$) Code (\$)	<b>30</b> .	~(		~	-	nes number of properties)	40	
103 22 203 11 Claims in excess of 20	146	770	246	385	Filing a sub-	mission after final rejection		
102 80 202 40 Independent claims in excess of 3					(37 CFR 1.1		- 11	
104 250 204 130 Multiple dependent ctalm	149	770	249	385	For each ad	iditional invention to be		
109 80 209 40 Reissue independent claims					examined (3	37 CFR 1.129(b))		
over original patent	-	lee (es	معنم			Ţ		
110 22 210 11 Relative claims in excess of 20 and over original petent		fee (ap						
		(	,,					
SUBTOTAL (2) (\$)						SUBTOTAL (3) (\$)	40	
	Redu	aced by	Bosic	Filing	Fee Paid	, , ,	40	
SUBMITTED BY						Complete (if applicat	ole)	
Typed or Printed Name 2001	HA	1 A	۰۸			Reg. Number		
Printed Name	/: //	ر ا <u>دا</u>	<u>~</u>		<u> </u>	ivey. Isuilibei		
Signature			٦	-	Junia	Deposit Account		

SUBMITTED B	Y	Complete (if applicable)
Typed or Printed Name	210M HADAD	Reg. Number
Signature	Date 7/10/00	Deposit Account User ID

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231, DO NOT SEND FEES CR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents.

.....